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NO. 1473 P. 2

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Atty. Dkt. No. 071949-1315

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kenneth F. Buechler

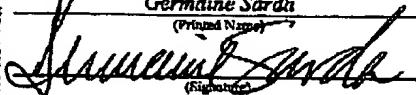
Title: DIAGNOSTIC DEVICES AND
APPARATUS FOR THE
CONTROLLED MOVEMENT OF
REAGENTS WITHOUT
MEMBRANES

Appl. No.: 09/982,629

Filing Date: 10/18/2001

Examiner: Lyle Alexander

Art Unit: 1743

<u>CERTIFICATE OF FACSIMILE TRANSMISSION</u>	
I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
	
Germaine Sarda (Printed Name)	
November 9, 2004 (Date of Deposit)	

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed please find the following:

- Terminal Disclaimer for '510 patent (3 pages)
- Appendix A – Assignment for instant application (3 pages)
- Appendix B – Assignment for U.S. Patent Application No. 09/805,653 (2 pages)
- Declaration and Power of Attorney (3 pages)
- Supplemental Application Data Sheet (3 pages)

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PAGE 2/19: RCVD AT 11/9/2004 8:04:58 PM [Eastern Standard Time] SVR:USPTO-EFXRF-1/3 DNIS:3729306 CSID: DURATION (mm:ss):05:12

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Atty. Dkt. No. 071949-1315

[X] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	17	- 21	= 0	X \$18.00 =	\$0.00
Independents:	3	- 3	= 0	X \$86.00 =	\$0.00
First presentation of any Multiple Dependent Claims:			+ \$290.00 =		\$0.00
			CLAIMS FEE TOTAL	=	\$0.00
[X] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):			\$110.00		\$110.00
			CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$550.00
[] Small Entity Fees Apply (subtract 1/2 of above):					\$0.00
			TOTAL FEE:		\$110.00

[X] Please charge Deposit Account No. 50-0872 in the amount of \$110.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 9, 2004

By Barry S. Wilson

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